

In re application of:
Serial No. 09/635,968

Filed: August 10, 2000

For: SINGLE MODE, SINGLE LOBE SURFACE EMITTING DISTRIBUTED FEEDBACK SEMICONDUCTOR LASER
COMMISSIONER FOR PATENTS
Patent and Trademark Office
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- Small entity status of this application under 37 CFR §1.9 and §1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity under 37 CFR §1.9 and §1.27 is enclosed.
- No additional fee is required.

NO additional fee is required.

(Col. 1)		(Col. 2)		(Col. 3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	16	MINUS	43	= 0		x 9 =	\$ 0		x 18 =	\$
INDEP.	3	MINUS	3	= 0		X 42 =	\$ 0		x 84 =	\$
<input checked="" type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+ 140 =	\$		+ 280 =	\$
						TOTAL ADDIT. FEE	\$ 0	OR	TOTAL	\$

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Please charge my Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is attached.

A check in the amount of \$ _____ is attached.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2350. A duplicate copy of this sheet is attached.

Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR §1.17.

Please stamp the enclosed postcard with the filing date and serial number and return the same to me.

Respectfully submitted,

Harry C. Engstrom, Reg. No. 26,876
Foley & Lardner
P.O. Box 1497
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PATENT APPLICATION

~~SEARCHED~~ IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Dan Botez,
James G. Lopez,
Gunawan Witjaksono Date: April 15, 2003
Docket No.: 032026:0471
Serial No.: 09/635,968 Group Art Unit: 2828
Filed: August 10, 2000 Examiner: Cornelius H. Jackson

For: **SINGLE MODE, SINGLE LOBE SURFACE EMITTING DISTRIBUTED FEEDBACK SEMICONDUCTOR LASER**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Patent and Trademark Office, Washington, D.C. 20231 on April 15, 2003.

Harry C. Engstrom

(Name of applicant, assignee
or Registered Representative)

April 15, 2005
(Date of Signature)

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REQUEST FOR CORRECTION OF FILING RECEIPT

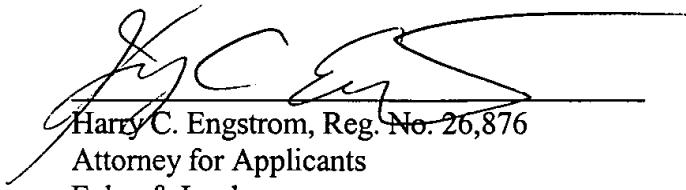
Commissioner for Patents
Patent and Trademark Office
Washington, DC 20231

Dear Sir:

Applicants request correction of the Filing Receipt for this application to show that this application claims the benefit of provisional application Serial No. 60/148,857, filed on August 13, 1999, as shown on Page 2 of the Declaration as signed by the inventors and on the first page of the patent application as filed.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication to Deposit Account No. 50-2350. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



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Bib Data Sheet

CONFIRMATION NO. 6270

SERIAL NUMBER 09/635,968	FILING DATE 08/10/2000 RULE	CLASS XXX	GROUP ART UNIT 2828	ATTORNEY DOCKET NO. 032026-0471
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APPLICANTS

Dan Botez, Madison, WI;
 James G. Lopez, Derry, NH;
 Gunawan Witjaksono, Madison, WI;

** CONTINUING DATA *****

This appln claims benefit of 60/148,857 08/13/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 09/21/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 10	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

23524

TITLE

Single mode, single lobe surface emitting distributed feedback semiconductor laser

FILING FEE RECEIVED 627	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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